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PTO/SB/81 (11-04)  
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INDICATION FORM**

Application Number	10/050,877
Filing Date	01/18/2002
First Named Inventor	Moe Mostashari
Title	
Art Unit	3713
Examiner Name	John M. Hotaling
Attorney Docket Number	MOSTASHARI05-01

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Robert Ryan Morshita	42907

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☒ Firm or Individual Name Morshita Law Firm, LLC

Address 3800 Howard Hughes Pkwy., Suite 850

City Las Vegas State NV Zip 89109

Country US

Telephone 702-222-2113 Fax 702-227-0615

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

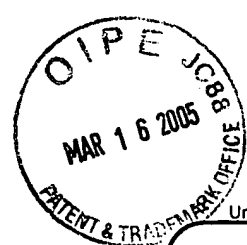
Signature		Date	2/3/05
Name	Moe Mostashari	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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PTO/SB/82 (09-04)

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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/050,877
Filing Date	01/18/2002
First Named Inventor	Moe Mostashari
Art Unit	3713
Examiner Name	John M. Hotaling
Attorney Docket Number	MOSTASHARI05-01

**I hereby revoke all previous powers of attorney given in the above-identified application.**☒ A Power of Attorney is submitted herewith.**OR**☐ I hereby appoint the practitioners associated with the Customer Number: ☐ Please change the correspondence address for the above-identified application to:☐ The address associated with  
Customer Number: **OR**☒ Firm or  
Individual Name Morishita Law Firm, LLC

Address 3800 Howard Hughes Pkwy., Suite 850

City Las Vegas

State NV

Zip 89109

Country US

Telephone 702-222-2113

Fax 702-227-0615

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**Signature 

Name Moe Mostashari

Date 3/5/2005

Telephone 

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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